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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)								Application Number <div style="font-size: 1.2em; font-family: cursive;">10/519,105</div>		Filing Date <div style="font-size: 1.2em; font-family: cursive;">12/23/2004</div>		
								Applicant(s) <div style="font-size: 1.2em; font-family: cursive;">Tsutomu Yoshitake, et al.</div>				
								* May be used for additional claims or amendments				
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Claims	35											

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